			. •						1	00	87	15 2
	PATENT A	PPLICATIO Effect	N FEE DE	TERM er 1, 20	IINATIO	N RECO	RD				icket Numi	
		CLAIMS AS	Column 1		(Colum	ın 2)`	_	MALL EN	ITITY	OR	OTHER SMALL I	
TOTAL CLAIMS			25	25				RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ε	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS 2			25min	nus 20= * 5			X\$ 9=		OR	X\$18=	90	
INDEPENDENT CLAIMS & mir			1 min	us 3 =	• 2			X42=		OR	X84=	168
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	993
CLAIMS AS AMENDED - PART II  ///25/04 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
NTA	7007	CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER NOUSLY OFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ONE	Total	. 25	Minus	-2	8		-1	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	· 5	Minus	*** (	2	=		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ן ו	+140=		OR	+280=	
(	-/1910	S(Column 1)		(Coli	umn 2)	(Column 3)	4	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
NT B	1	CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	IHEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S S	Total	. 25	Minus	***	25,	-	7 [	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	. 5	Minus	200	3	[·	]	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ال	+140=		OR	+280=		

		(Column 1)		(Calumn 2)	(Column 3)					
NTC	*	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA					
AMENDMENT	Total	•	Minus		•					
Ē	Independent		Minus	***	=					
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									

FORM PTO-875 (Rev. 8/01)

PRIENT and Trademark Office, U.S. DEPARTMENT OF COUNTRY

OR

OR

TOTAL

ADDI-

TIONAL

FEE

ADDIT. FEE

RATE

XS 9=

X42=

TOTAL

RATE

XS18=

X84=

ADDI-

TIONAL FEE

OR ADDIT FEE

<sup>+280=</sup> +140= OR \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. TOTAL OR ADDIT. FEE